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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

| adminer to respend to the consessor, or | INDITIONAL CONTRACTOR OF CONTRACTOR CONTRACT |
|---|--|
| Application Number | 10/595,423 |
| Filing Date | 12/10/2004 |
| First Named Inventor | Dustin F. Janes |
| Art Unit | Unknown |
| Examiner Name | Unknown |
| Attorney Docket Number | FOXR0011-2 |

| To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | | | | | |
|--|------------------------------|------------------|-------|------|----------------------------|--------|--------|--|--|--|
| Please withdraw me as attorney or agent for the above identified patent application, and | | | | | | | | | | |
| all the attomeys/agents of record. | | | | | | | | | | |
| the attomeys/agents (with registration numbers) listed on the attached paper(s), or | | | | | | | | | | |
| the attomeys/agents associated with Customer Number | | | | 22 | 22862 | | | | | |
| NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number. | | | | | | | | | | |
| The reasons for this request are: Applicant transferred all files back to their in-house counsel. | | | | | | | | | | |
| | | | | | | | | | | |
| CORRESPONDENCE ADDRESS | | | | | | | | | | |
| 1. The correspondence address is NOT affected by this withdrawal. | | | | | | | | | | |
| 2. Change the correspondence address and direct all future correspondence to: | | | | | | | | | | |
| 2 Olidings the correspondence address and direct air father correspondence to. | | | | | | | | | | |
| The address associated with Customer Number: 49567 | | | | | | | | | | |
| OR | | | | | | | | | | |
| | m <i>or</i> lividual Name | | | | • | | | | | |
| Address | | | | | | | | | | |
| | | | | | | | | | | |
| City | | | State | | , | | Zip | | | |
| Country | | | | | | | | | | |
| Telephone | | | | | Email | | | | | |
| Signature | 7- | | | | | | | | | |
| Name | Michael A. Gle | Registration No. | | | | lo. 30 | 30,176 | | | |
| Date | te December 12, 2006 | | | Tele | Telephone No. 650-474-8400 | | | | | |
| NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdrawals normally disapproved. | | | | | | | | | | |

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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